

State of Indiana 2009 Rates

Plan	Coverage	Biweekly Employee Premium	Biweekly Employer Premium	Biweekly Total Premium	Monthly Premium Rate	COBRA	Annual Employee Premium Contribution	Annual Employer Premium Contribution	Annual Employer HSA Contribution	Annual Employer Contribution	Annual Total
HDHP 1	Single	\$0.00	\$121.92	\$121.92	\$264.16	\$269.44	\$0.00	\$3,169.92	\$1,375.92	\$4,545.84	\$4,545.84
	Family	\$0.00	\$375.00	\$375.00	\$812.50	\$828.75	\$0.00	\$9,750.00	\$2,750.28	\$12,500.28	\$12,500.28
HDHP 2	Single	\$19.32	\$138.84	\$158.16	\$342.68	\$349.53	\$502.32	\$3,609.84	\$936.00	\$4,545.84	\$5,048.16
	Family	\$47.58	\$408.84	\$456.42	\$988.91	\$1,008.69	\$1,237.08	\$10,629.84	\$1,870.44	\$12,500.28	\$13,737.36
Anthem Traditional II	Single	\$62.73	\$174.84	\$237.57	\$514.74	\$525.03	\$1,630.98	\$4,545.84	\$0.00	\$4,545.84	\$6,176.82
	Family	\$184.86	\$480.78	\$665.64	\$1,442.22	\$1,471.06	\$4,806.36	\$12,500.28	\$0.00	\$12,500.28	\$17,306.64
Welborn HMO	Single	\$33.03	\$174.84	\$207.87	\$450.38	\$459.39	\$858.78	\$4,545.84	\$0.00	\$4,545.84	\$5,404.62
	Family	\$91.47	\$480.78	\$572.25	\$1,239.87	\$1,264.67	\$2,378.22	\$12,500.28	\$0.00	\$12,500.28	\$14,878.50
Delta Dental	Single	\$0.00	\$9.63	\$9.63	\$20.85	\$21.27	\$0.00	\$250.38	\$0.00	\$250.38	\$250.38
	Family	\$0.00	\$27.57	\$27.57	\$59.73	\$60.92	\$0.00	\$716.82	\$0.00	\$716.82	\$716.82
EyeMed Vision	Single	\$0.00	\$1.58	\$1.58	\$3.43	\$3.50	\$0.00	\$41.16	\$0.00	\$41.16	\$41.16
	Family	\$2.43	\$1.58	\$4.01	\$8.69	\$8.86	\$63.12	\$41.16	\$0.00	\$41.16	\$104.28

Flexible Spending Accounts										
Medical, Limited Purpose Medical (HSA Holders) and/or Dependent Care Admin Fee	\$2.59	\$0.00	\$2.59	\$5.61	\$5.61	\$67.34	\$0.00	\$0.00	\$0.00	\$67.34

HSA Accounts	Coverage	Initial Contribution *	Biweekly Contribution	Monthly Contribution	Maximum Annual ER Contribution
HDHP1/HSA	Single	\$687.96	\$26.46	\$57.33	\$1,375.92
	Family	\$1,375.14	\$52.89	\$114.60	\$2,750.28
HDHP2/HSA	Single	\$468.00	\$18.00	\$39.00	\$936.00
	Family	\$935.22	\$35.97	\$77.94	\$1,870.44

* Initial contribution as listed above applies to employees with an HDHP plan effective between 1/1/09 thru 6/1/09 and with an open HSA account. HDHP plans effective after 6/1/09 but before 12/2/09 and with an open HSA account will receive 1/2 of the initial contribution.

Employees participating in the HDHP plans are reminded that they must open an HSA account in order to receive the state's HSA contribution.